

# ORGANIC PROCESSED PRODUCT REGISTRATION APPLICATION INITIAL

**Instructions:** Instructions for completing this form are on the reverse side. Please complete this form fully.

1) Name of Firm: \_\_\_\_\_ Organic Processed Product Registration (OPPR) No.: \_\_\_\_\_  
 \_\_\_\_\_ OPPR Expiration Date: \_\_\_\_\_  
 \_\_\_\_\_ (for office use only)  
 \_\_\_\_\_ Processed Food Registration (PFR) No.: \_\_\_\_\_  
 \_\_\_\_\_ PFR Expiration Date: \_\_\_\_\_  
 \_\_\_\_\_ Food and Agriculture Registration No.: \_\_\_\_\_

2) Facility Address: \_\_\_\_\_ 3) Mailing Address: (if different) \_\_\_\_\_

\_\_\_\_\_ Telephone No: ( ) \_\_\_\_\_ Contact Person: \_\_\_\_\_  
 \_\_\_\_\_ Telephone No: ( ) \_\_\_\_\_

4) Type of Business: ☐ PROCESSOR ☐ HANDLER ☐ HANDLER that does not take possession or title

5) Type and Quantity of Food Commodities Handled/Processed Annually: (Attach additional list if needed)

5A) Processed Product Commodity Code Number	5B) Total Quantity of Each Product Commodity <u>Handled</u> at This Facility	5C) Quantity of This Product Commodity <u>Processed</u> at This Facility	5D) Check Only One
			<input type="checkbox"/> Lbs <input type="checkbox"/> Gals
			<input type="checkbox"/> Lbs <input type="checkbox"/> Gals
			<input type="checkbox"/> Lbs <input type="checkbox"/> Gals
			<input type="checkbox"/> Lbs <input type="checkbox"/> Gals

6) Certification Organization(s) or Government Entities Certifying These Product(s) as Organic (if Any):  
 Name \_\_\_\_\_ Address \_\_\_\_\_

7) Annual Gross Sales or Revenue from Processing/Handling Organic Processed Products at this Facility:

Total Gross Sales or Revenue \$ \_\_\_\_\_

8) Organic Processed Product Registration Fee ..... Amount Due: \_\_\_\_\_

9) Penalties Due if More Than 30 Days After Due Date (1% Per Month) ..... Penalty Due: \_\_\_\_\_

Total Amount Paid: \_\_\_\_\_

10) Signature of Applicant: \_\_\_\_\_

11) Print Name and Title : \_\_\_\_\_ Date: \_\_\_\_\_

NOTE: You must notify the Department of Health Services immediately of any changes in the above information. By signing this form applicant affirms that all information provided is true and correct. Make checks payable to: Department of Health Services. Mail To: Food and Drug Branch, P.O. Box 942832, Sacramento, CA 94234-0007

**SEE OTHER SIDE**

**PCA #84132**

**Instructions For Completing The Organic Processed Product Registration Application****PLEASE PRINT OR TYPE**

1. **Name of Firm:** Enter full name of business, corporation, company, or organization applying for registration.  
**Organic Processed Product Registration (OPPR) No:** We will assign and enter your registration number here when your application is received by the Food and Drug Branch (FDB).  
**OPPR Expiration Date:** We will assign an expiration date and enter it here when your application is received by FDB. The expiration date is the same date as a firm's Processed Food Registration (PFR) expiration date or if not registered under PFR, it is one calendar year from the date the completed application is received.  
**Processed Food Registration (PFR) No:** We will assign and enter your registration number here.  
**PFR Expiration Date:** We will assign and enter your PFR expiration date here.  
**Food and Agriculture Registration No:** If you are registered by the California Department of Food and Agriculture as an Organic Producer/Handler/Processor, enter your registration number here.
2. **Facility Address:** Enter the street, city, and zip code for this facility location.  
**Telephone Number:** Enter daytime business telephone number of this facility.
3. **Mailing Address:** Enter full mailing address if different from the facility address.  
**Contact Person:** Enter the name of the person to contact for information regarding this application.  
**Telephone Number:** Enter the daytime business telephone number of the contact person.
4. **Type of Business:** Place an (X) in the box next to "Processor" if you process Organic Food Products in this facility. Place an (X) in the box next to "Handler" if you handle Organic Food Products in this facility.  
Definition: "**Handler**" means any person who ships, packs, repacks, sells for resale, warehouses, wholesales, imports into the state, or stores food and is other than a grower, producer, processor, or retailer of that food.  
**Note:** Registrants who process and handle organic food products should check both boxes.
5. **5A) Processed Product Commodity Code No:** Refer to the enclosed Processed Product Commodity Code List, locate the code number of each **organic** processed product commodity processed or handled at this facility and enter each number in this column.  
**Attach an additional list of processed commodities if more space is needed.**  
**5B) Total Quantity of Each Processed Commodity Handled at This Facility:** This information will remain **CONFIDENTIAL**. Enter the total quantity of each processed commodity that is **Sold as Organic** and annually handled and/or processed at this facility. A food is "**Sold as Organic**" if the food, or one or more of its ingredients, is claimed to be organic. Refer to the definition of Sold as Organic (Footnote #2) on the bottom of the registration notice you received (Health & Safety Code Section 110815 (r)). Use the most recent 12 month period for which you have records, or if none available, enter the projected quantity to be handled in the 12 months following the date of registration.  
**5C) Quantity of This Product Commodity Processed at this Facility:** This information will remain **CONFIDENTIAL**. Enter the quantity of this organic product commodity actually **processed** in this facility annually. Use the most recent 12 month period for which you have records, or if none available, enter the projected quantity to be processed in the 12 months following the date of registration.  
**5D) Pounds/Gallons:** Place an (X) in the box that shows whether the quantity reported is in pounds or gallons.
6. **Certification Organizations:** Enter the name(s) and addresses of certification organizations or government entities certifying your product(s) as organic (If any). If none, leave blank.
7. **Annual Gross Sales or Revenue:** This information will remain **CONFIDENTIAL**. Enter the total annual gross sales received from the sale of Organic Processed Product commodities or revenue received for processing/handling organic products at this facility. Use the most recent 12 month period for which you have records, or if none available, enter the projected gross revenue for the 12 months following the date of registration.
8. **Amount Due:** This is the registration fee amount to be paid by you. Pay only the registration fee if your payment is being made within 30 days after the due date. (See #9 below)

**Organic Processed Product Registration Fees:**

Gross Annual Sales or Revenue	Annual Registration Fee
\$0-\$5,000	\$ 50
\$5,001-\$50,000	\$100
\$50,001-\$125,000	\$200
\$125,001-\$250,000	\$300
\$250,001-\$500,000	\$400
\$500,001-\$1,500,000	\$500
\$1,500,001-\$2,500,000	\$600
\$2,500,001-and above	\$700

**Notes:**

- Any handler that does not take possession or title of the product but arranges for the sale of the product shall register and pay one hundred dollars (\$100) per year.
- Any person that only provides temporary storage for seven days or less, or only provides transportation for organic product and does not handle the processed packaged product, does not have to register.

9. **Penalty Due:** A penalty of 1% per month is due if your payment is submitted **more than 30 days** after the due date (i.e., if paid more than 30 days after the date on the letter you received from the Department of Health Services or if more than 30 days after the expiration date of your PFR or OPFR). You must pay a 1% per month penalty on the unpaid balance. To calculate the penalty due, see example below:  
Computation Example: Due date 1/1/94. Date you actually submitted payment 3/1/94 = 2 months late.  
If Registration fee is \$100.00 multiply \$100.00 x 1% = \$1.00 penalty per month x 2 (months) = \$2.00 total penalty due. Enter the penalty amount on the Penalty Due line.  
Add penalty and registration fee together to determine total amount due. Enter this amount on the Total Amount Paid line. Make your check out for this amount.
10. **Sign the application**
11. **Print your name and title. Enter date signed.**

MAKE CHECKS PAYABLE TO: **DEPARTMENT OF HEALTH SERVICES**

MAIL APPLICATIONS TO: Food and Drug Branch,  
P.O. Box 942832  
Sacramento, Ca 94234-0007.

**PROCESSED PRODUCTS COMMODITY CODES**

(Check All That Apply)

Registration Number: \_\_\_\_\_  
(For office use only)

<input type="checkbox"/>	10	SOFT DRINKS, CARBONATED AND NON-CARBONATED; WATERS
<input type="checkbox"/>	20	BEVERAGE BASES, LIQUID AND DRY
<input type="checkbox"/>	30	COFFEE AND TEA
<input type="checkbox"/>	40	ALCOHOLIC AND MALT BEVERAGES, WINES, DISTILLED LIQUORS
<input type="checkbox"/>	50	BREAD, ROLLS, BUNS, SWEET GOODS AND CRACKERS
<input type="checkbox"/>	60	CUSTARD AND CREAM FILLED SWEET GOODS
<input type="checkbox"/>	70	MACARONI AND NOODLE PRODUCTS
<input type="checkbox"/>	80	BREAKFAST CEREALS, READY TO EAT
<input type="checkbox"/>	90	WHOLE GRAIN AND BEANS, BULK
<input type="checkbox"/>	100	PRETZELS, CHIPS, TORTILLAS AND SPECIALTY ITEMS
<input type="checkbox"/>	110	PROCESSED GRAINS AND STARCH PRODUCTS FOR HUMAN USE
<input type="checkbox"/>	120	PREPARED MIXES (FLOUR OR MEAL BASED) DRY
<input type="checkbox"/>	130	CANDY, CHEWING GUM, CHOCOLATE AND COCOA PRODUCTS
<input type="checkbox"/>	140	SYRUPS, SUGARS, HONEY
<input type="checkbox"/>	150	BUTTER AND BUTTER PRODUCTS
<input type="checkbox"/>	160	CHEESE AND CHEESE PRODUCTS
<input type="checkbox"/>	170	FLUID MILK AND FLUID MILK PRODUCTS
<input type="checkbox"/>	180	DRIED MILK AND DRIED MILK PRODUCTS
<input type="checkbox"/>	190	ICE CREAM AND RELATED PRODUCTS
<input type="checkbox"/>	200	EGGS AND EGG PRODUCTS
<input type="checkbox"/>	210	FISH AND FISH PRODUCTS (EXCEPT SMOKED)
<input type="checkbox"/>	220	SHELLFISH, CRUSTACEANS & OTHER AQUATIC ANIMALS (EXCEPT SMOKED)
<input type="checkbox"/>	230	SMOKED FISH, SHELLFISH AND CRUSTACEANS
<input type="checkbox"/>	240	SPICES AND SALT
<input type="checkbox"/>	250	EXTRACTS AND FLAVORS
<input type="checkbox"/>	260	DRESSINGS AND CONDIMENTS
<input type="checkbox"/>	270	FRESH FRUITS AND JUICES
<input type="checkbox"/>	280	FROZEN FRUITS AND JUICES
<input type="checkbox"/>	290	CANNED FRUITS, JUICES CONCENTRATES AND NECTARS
<input type="checkbox"/>	300	DRIED FRUITS
<input type="checkbox"/>	310	JAMS, JELLIES, PRESERVES AND BUTTERS
<input type="checkbox"/>	320	FRUIT PRODUCTS, INCLUDING OLIVES
<input type="checkbox"/>	330	ANIMAL FEEDS
<input type="checkbox"/>	340	BY-PRODUCTS FOR ANIMAL FEEDS
<input type="checkbox"/>	350	MEAT AND MEAT PRODUCTS
<input type="checkbox"/>	360	NUTS AND NUT PRODUCTS
<input type="checkbox"/>	370	VEGETABLE OIL SEED, OIL STOCK AND CRUDE OIL
<input type="checkbox"/>	380	REFINED VEGETABLE OILS, VEGETABLE SHORTENING & OLEO MARGARINE
<input type="checkbox"/>	390	FRESH VEGETABLES
<input type="checkbox"/>	400	FROZEN VEGETABLES AND JUICES
<input type="checkbox"/>	410	CANNED VEGETABLES AND JUICES
<input type="checkbox"/>	420	DRIED AND DEHYDRATED VEGETABLES
<input type="checkbox"/>	430	CURED AND PROCESSED VEGETABLE PRODUCTS
<input type="checkbox"/>	440	DRY DESSERT AND PUDDING MIXES
<input type="checkbox"/>	450	MULTIPLE FOODS, PRE-PACKAGED MEALS, FROZEN DINNERS
<input type="checkbox"/>	460	MISCELLANEOUS FOOD USE ITEMS, ICE
<input type="checkbox"/>	470	MULTIPLE FOOD WAREHOUSE
<input type="checkbox"/>	480	FOOD CHEMICALS
<input type="checkbox"/>	490	INFANT, JUNIOR AND GERIATRIC FOODS
<input type="checkbox"/>	500	MISCELLANEOUS DIETARY FOOD ITEMS, SPECIALTIES, SWEETENERS
<input type="checkbox"/>	550	VITAMINS, OTHER NUTRITIONAL SUPPLEMENTS
<input type="checkbox"/>	910	COSMETICS